

EXHIBIT

3

Donald Cleary dcleary@animalfarmfoundation.org

Re: Your study, "Characteristics of 1616 Consecutive Dog Bite Injuries. . . "

3 messages

Golinko, **Michael S** <MSGolinko@uams.edu> To: Donald Cleary <dcleary@animalfarmfoundation.org> Mon, Nov 28, 2016 at 10:26 AM

Mr. Cleary, thank you for taking the time to detail such a message- this feedback really helps me as examining one side of the issue, understand its multiple dimensions. I totally agree about the breed bias and my goal in Arkansas is to speak to what you ended your email with to address " problems of education and compliance" -- -Im actually meeting with the State Public Health Veterinarian , Susan Weinstein DVM, MPH, tomorrow afternoon to see how we can partner together to improve on these issues with regards to repsonsible ownership, particularly around young children in Arkansas- we welcome any other advice you may have!

Michael

Michael S. Golinko MD,MA
Medical Director Arkansas Children's Hospital Craniofacial Program
Craniofacial, Cleft & Pediatric Plastic Surgery
Assistant Professor of Plastic Surgery UAMS
1 Children's Way, Slot 707

Little Rock, AR 72202 Office: 501-364-5775 Fax: 501-364-1649

From: Donald Cleary dcleary@animalfarmfoundation.org

Sent: Monday, November 14, 2016 12:22 PM

To: Golinko, Michael S

Subject: Your study, "Characteristics of 1616 Consecutive Dog Bite Injuries. . ."

Michael S. Golinko

Arkansas Children's Hospital

Division of Plastic Surgery

1 Children's Way

Little Rock, AR 72202

Dear Dr. Golinko:

I am an author of "Co-occurrence of potentially preventable factors in 256 dog bite-related fatalities in the United States (2000-2009)" (JAVMA, Dec. 2013). I have read your study "Characteristics of 1616 Consecutive Dog Bite Injuries at a

Case 1:21-cv-00012-DLH-CRH Document 91-3 Filed 08/03/22 Page 2 of 3

Single Institution" and heartily agree that the etiology of dog bites is complex and multifactorial, not lending itself to simple explanation. However, I am writing to share concerns about your characterization of breed distribution, and your assumptions as to its significance.

Collecting information about breed assumes, first, that breed can be reliably identified; second, that representative percentages of the dogs will be reliably identified as members of genetically distinct, recognized breeds; and third, that genetic makeup reliably predicts complex behavior, such as biting. None of these assumptions are supportable.

First, assigning accurate breed descriptors to dogs, including dogs involved in bites, is notoriously difficult. Surveys conducted across the United States have demonstrated that breed identifications based on visual examination, even by persons engaged in animal related occupations, correlated poorly with breed identification by DNA analysis. Further, such persons frequently disagree with each other when venturing opinions about the breed or breeds in the same dog.

Second, a significant percentage of the dogs in the United States are not members of recognized breeds. The 2012 American Veterinary Association demographic survey reported that only 54% of the dogs in the United States were purebred. An American Pet Products Association survey reported that only 40% of the respondents said they obtained their dog from a breeder or a pet store. Dogs previously surrendered to animal shelters are a significant source of pet dogs. Approximately 75% of dogs in animal shelters are mixed bred dogs. (Some animal shelters have simply stopped assigning breed descriptors to the dogs in their care.) Both breed club registration and licensing compliance in the US are low (not more than 25%). Reliable breed demographics, beyond the estimate of purebred/mixed breed, are unknown.

In our comprehensive study of dog bite-related fatalities you cited, we obtained information regarding the circumstances of 256 incidents from as many official and media sources as we could locate. We were able to reliably identify breed in only 17.6% of the cases. The much more limited universe of hospital records cannot be considered sufficient to make any reliable statement about breed, even among the minority (31.3%) of cases where you found any mention.

Third, multiple studies have examined the assumption that breed is a reliable predictor of biting behavior. The assumption is not supportable, and in the case of mixed breed dogs, the logic falls apart even further.

To this uncertainty must be added, as you recognized, factors such as owner training, child behavior, relationship to the to the dog, and the specific conditions when the bite occurred, that have an important confounding effect, but were not available and therefore could not be taken into account. In our study of dog bite-related fatalities, we identified seven potentially preventable factors -- that is, factors potentially within the control of dog owners -- four or more of which co-occurred in 80.5% of the cases. Our findings are consistent with the consensus among animal experts that human behaviors such as inappropriate husbandry, failure to socialize pets, inflicting intentional physical harm on them, and failure to understand the implications of such behaviors are factors that have been demonstrated to correlate with harm to humans during interactions with dogs. This type of information and level of detail is lacking from hospital records.

I share your concerns about the well-being and safety of the community, and respect your desire to discuss the treatment of dog bite-related injuries with fellow professionals. At the same time, I hope that human medical professionals consider the limitations of data based on visual identification, and/or pure speculation about breed, and reject, rather than report with caveats even in a descriptive fashion, data that do not meet accepted scientific standards for completeness and accuracy.

Case 1:21-cv-00012-DLH-CRH Document 91-3 Filed 08/03/22 Page 3 of 3

The medical literature on dog bites has surely contributed to better practices in physicians' offices, emergency departments and trauma centers. However, it has not added to the principles of good husbandry and safety, which those in animal-related occupations have understood for decades. The challenge is compliance with commonly accepted standards of safe, humane care and control, whatever the dog. Some of these principles can be legislated: leash laws, for example. Others, such as not leaving dogs alone with small children or other persons unable to interact appropriately with them, or taking care to accustom a dog to life in a world that human beings control, cannot be legislated, and are problems of education and compliance.

I hope you will share my letter with your co-authors.
Yours sincerely,
Donald Cleary
Treasurer, Animal Farm Foundation, Inc.
Research and Policy Consultant
National Canine Research Council
PS: With respect to your citation No. 39 (Raghavan et al, "Effectiveness of breed-specific legislation"), in my view, the title and conclusion are not in line with the actual data. Dr. Raghavan reported that the rate of dog bite injury hospitalization had remained approximately the same in the Manitoba jurisdictions that had banned pit bulls, but had fallen in Manitoba as a whole. Dr. Raghavan reported before/after hospitalization data for the communities that had banned pit bulls, but not for those that had not. Separate from Dr. Raghavan's study, media accounts quote municipal officials from the banning communities as having stated that pit bulls had disappeared from the banning communities. Dr. Raghavan did not report any breed populations in the non-banning areas before or after the bans.
Dr. Raghavan also pointed out that long-term changes can be a product of potentially confounding factors other than the factor under examination, such as changes in non-breed specific ordinances, public safety campaigns, etc. No potentially

confounding factors were directly accounted in the study. By way of example, in 1992, the Manitoba Law Reform Commission published a report entitled, "Tort Liability for Animals." Among its recommendations: "The Manitoba Law Reform Commission proposes that scienter and cattle trespass be abolished and recommends a new statutory source

of liability. . . The statutory tort being proposed by the Commission would adopt the presumption that the owner or harbourer (keeper) of animals are liable for the harm or damage they cause." (Page 56) Thereafter, municipalities such as Brandon, one of the non-banning communities, enacted changes to their animal bylaws. Manitoba's Animal Liability

Act of 1998 is also breed-neutral.